

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

RECEIVED  
OCT 30 2018  
Bayfield Co. Zoning Dept.



Permit #:	18-0478
Date:	11-26-18
Amount Paid:	\$195 10-31-18
Refund:	

cross from 14610

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Option 4 (U,N,W,HOA) **FILE OUT IN INK (NO PENCIL)**

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: Lake Owen U. Has Owners Assoc	Mailing Address: P.O. Box 986	City/State/Zip: Hayward, WI 54843	Telephone: Gary Cell Phone: (563) 299-8174
Address of Property: Resort Rd.	City/State/Zip:		Plumber Phone:
Contractor: Scott Haan (715) 580-0089	Contractor Phone:	Plumber: NA	Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Gary Schulte / Mike Fortak (715) 817-2034	Agent Phone:	Agent Mailing Address (include City/State/Zip): 6173 Iron Lake Rd, Iron River, WI 54847	Recorded Document: (Showing Ownership) 2017R 571000
PROJECT LOCATION Legal Description: (Use Tax Statement) 1/4, 1/4	Tax ID# 8406	Subdivision:	
Gov't Lot 2	Lot(s)	CSM	Vol & Page
CSM Doc #	Lot(s) No.	Block(s) No.	Subdivision:
Section 5, Township 43 N, Range 7 W	Town of: Cable	Lot Size	Acreage 19.3

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? <b>If yes---continue →</b>	Distance Structure is from Shoreline : _____ feet	<b>Is Property in Floodplain Zone?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Are Wetlands Present?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage <b>If yes---continue →</b>	Distance Structure is from Shoreline : <u>200+</u> feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms in structure	What Type of Sewer/Sanitary System is on the property?	Type of Water on property
\$65,000	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> slab	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Conv</u>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
			<input type="checkbox"/>	<input type="checkbox"/> None		

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>54</u>	Width: <u>24</u>	Height: <u>14</u>
Proposed Construction:	Length: _____	Width: <u>24</u>	Height: <u>14</u>

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	( X )	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X )	
		with Loft	( X )	
		with a Porch	( X )	
		with (2nd) Porch	( X )	
		with a Deck	( X )	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	( X )	
		with Attached Garage	( X )	
	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	( X )	
	<input type="checkbox"/>	Accessory Building (specify) _____	( X )	
	<input checked="" type="checkbox"/>	Accessory Building Addition/Alteration (specify) <u>(U,N,W) (HOA)</u>	<u>(24 x 54)</u>	<u>1,296</u>
			<u>10/30 x 24</u>	<u>360</u>
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): \_\_\_\_\_  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Mike Fortak  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 673 Iron Lake Rd, Iron River, WI 54847  
If you recently purchased property, attach your Recorded Deed

Date \_\_\_\_\_  
Date 10/19/2018

Attach  
Copy of Tax Statement ✓  
properly recorded Deed



Draw or Sketch your Property (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

- Show Location of: Proposed Construction  
 (2) Show / Indicate: North (N) on Plot Plan  
 (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)  
 (4) Show: All Existing Structures on your Property  
 (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)  
 (6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond  
 (7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

See attachment

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	75' Feet	Setback from the Lake (ordinary high-water mark)	200' Feet
Setback from the Established Right-of-Way	50' Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	350' Feet	Setback from Wetland	150' Feet
Setback from the South Lot Line	225' Feet	20% Slope Area on the property	Yes No
Setback from the West Lot Line	35' Feet	Elevation of Floodplain	NA Feet
Setback from the East Lot Line Town Rd	NA Feet		
Setback to Septic Tank or Holding Tank	150' Feet	Setback to Well	150' Feet
Setback to Drain Field	150' Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE:** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
 For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
 The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 18-0478		Permit Date: 11-26-18		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record: Doc 325417 V323 P325			Zoning District (ARB)	
Accessory Structure Use To a Unit			Lakes Classification (1)	
Date of Inspection: 11/9/18		Inspected by: [Signature]		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached.)				
Signature of Inspector: [Signature]			Date of Approval: 11/26/18	
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

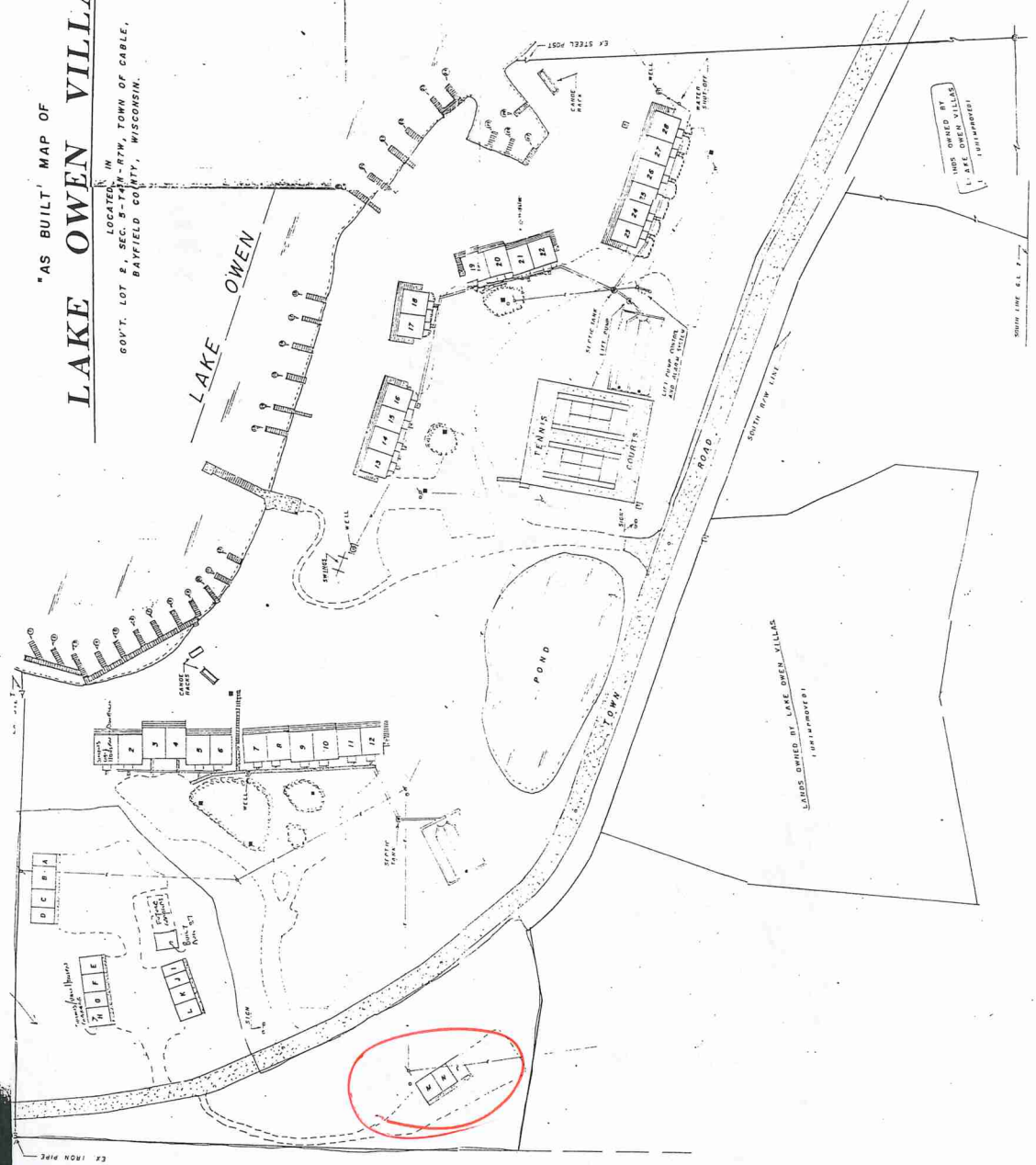
Condition: No accessory building shall be used for human habitation / sleeping purposes without necessary county and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

#1979

Gov. Lot 2 Sec 8-48-7

# "AS BUILT" MAP OF LAKE OWEN VILLAS

LOCATED IN  
60V.T. LOT 2, SEC. 8-T.48N.7W, TOWN OF CABLE,  
BAYFIELD COUNTY, WISCONSIN.



## LEGEND

- POWER POLE
- SERVICE VENT
- SEWER MANHOLE
- WELLS
- UNDER GROUND TELEPHONE
- SECURITY LIGHTS

PREPARED FOR  
LAKE OWEN VILLAS  
HOMEOWNERS ASSOCIATION  
1000 W. CANTON ST.  
PR. 2, BOX 28  
CABLE, WIS. 54821

PREPARED BY  
DUANE A. MARTIN  
VACATIONLAND SURVEYORS, INC.  
1000 W. CANTON ST.  
PR. 2, BOX 28  
CABLE, WIS. 54821

DATED 18 FEB 1985





City, Village, State or Federal  
Permits May Also Be Required

LAND USE - **X**  
SANITARY -  
SIGN -  
SPECIAL -  
CONDITIONAL -  
BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **18-0478** Issued To: **Lake Owen Villas Owners Association / Mike Furtak, Agent**

Location: -  $\frac{1}{4}$  of -  $\frac{1}{4}$  Section **5** Township **43** N. Range **7** W. Town of **Cable**

Par in Gov't Lot **2** Lot Block Subdivision CSM#

For: **Residential Accessory Structure Addition: [ 1- Story; Garage Addition (U, V, & W) (24' x 54') = 1,656 sq. ft. ]**  
**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Tracy Pooler**

Authorized Issuing Official

**November 26, 2018**

Date



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

RECEIVED  
Date Stamp (Received)  
OCT 30 2018

Bayfield Co. Zoning Dept.

Permit #:	18-0479
Date:	11-26-18
Amount Paid:	\$156 10-31-18
Refund:	

ENTERED

Across from 14610

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Option 1 (X, Y, Z)

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: Lake Owen Villas Owners Assoc.	Mailing Address: PO Box 986	City/State/Zip: Hayward, WI 54843	Telephone: Gary (563) 299-8174
Address of Property: Resort Rd	City/State/Zip: Cable, WI 54821	Cell Phone: 299-8174	
Contractor: Scott Haan (715) 580-0089	Contractor Phone: 580-0089	Plumber: NA	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Gary Schulte/Mike Fortak (715) 817-2034	Agent Phone: (715) 817-2034	Agent Mailing Address (include City/State/Zip): 6173 Iron Lake Rd, WI 54847	Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION 1/4, 1/4	Legal Description: (Use Tax Statement) Gov't Lot 2, Lot(s) 2, CSM Vol & Page, CSM Doc #, Lot(s) No., Block(s) No., Subdivision: 8406, 2017R 571000	Recorded Document: (Showing Ownership) 2017R 571000	
Section 5, Township 43 N, Range 7 W	Town of: Cable	Lot Size	Acreage 19.3

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : 200+ feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms in structure	What Type of Sewer/Sanitary System Is on the property?	Type of Water on property
\$52,000	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> slab	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Chuv	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)				<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input checked="" type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
				<input type="checkbox"/> None		

Existing Structure: (if permit being applied for is relevant to it)	Length: 54	Width: 24	Height: 14
Proposed Construction:	Length: 54	Width: 24	Height: 14

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	( X )	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X )	
		with Loft	( X )	
		with a Porch	( X )	
		with (2nd) Porch	( X )	
		with a Deck	( X )	
		with (2nd) Deck	( X )	
<input type="checkbox"/> Commercial Use		with Attached Garage	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	( X )	
	<input type="checkbox"/>	Accessory Building (specify, _____)	( X )	
	<input checked="" type="checkbox"/>	Accessory Building Addition/Alteration (specify) garage	(24 X 54)	1,296
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date \_\_\_\_\_

Authorized Agent: Mike Fortak  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date 10/19/2018

Address to send permit 6173 Iron Lake Rd, Iron River, WI 54847

Attach  
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (\*):

(\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- (6) Show any (\*):

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
- (7) Show any (\*):

(\*) Wetlands; or (\*) Slopes over 20%

See attachment

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement		Description	Measurement
Setback from the Centerline of Platted Road	75+ Feet		Setback from the Lake (ordinary high-water mark)	200+ Feet
Setback from the Established Right-of-Way	50+ Feet		Setback from the River, Stream, Creek	NA Feet
			Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	400+ Feet			
Setback from the South Lot Line	25 Feet		Setback from Wetland	150+ Feet
Setback from the West Lot Line	70+ Feet		20% Slope Area on the property	X Yes <input type="checkbox"/> No
Setback from the East Lot Line Town Rd	NA Feet		Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	150+ Feet		Setback to Well	150+ Feet
Setback to Drain Field	150+ Feet			
Setback to Privy (Portable, Composting)	NA Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE:** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:		# of bedrooms:		Sanitary Date:	
Permit Denied (Date):		Reason for Denial:					
Permit #: 18-0479		Permit Date: 11-26-18					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming		<input checked="" type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No <input type="checkbox"/> No <input checked="" type="checkbox"/> No		Mitigation Required Mitigation Attached	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		Affidavit Required Affidavit Attached	
Was Parcel Legally Created Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: Doc 325417 V323 P326 Accessory Structure to a Unit						Zoning District (RRB) Lakes Classification (1)	
Date of Inspection: 11/9/18		Inspected by: [Signature]				Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.)							
Condition: No accessory building shall be used for human habitation / sleeping purposes without necessary county and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.							
Signature of Inspector: [Signature]						Date of Approval: 11/26/18	
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	





own, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X**  
SANITARY –  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **18-0479** Issued To: **Lake Owen Villas Owners Association / Mike Furtak, Agent**

Location: -  $\frac{1}{4}$  of -  $\frac{1}{4}$  Section **5** Township **43** N. Range **7** W. Town of **Cable**

Par in  
Gov't Lot **2** Lot Block Subdivision CSM#

For: **Residential Accessory Structure: [ 1- Story; Garage (X, Y, & Z) (24' x 54') = 1,296 sq. ft. ]**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s):** No accessory building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Tracy Pooler**

Authorized Issuing Official

**November 26, 2018**

Date